

## PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective On 01/01/2001

10/031276✓

## CLAIMS AS FILED - PART I

		(Column 1)	(Column 2)
TOTAL CLAIMS			
FOR	NUMBER FILED	NUMBER EXTRA	
TOTAL CHARGEABLE CLAIMS	21 minus 20 =	1	
INDEPENDENT CLAIMS	3 minus 3 =		
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

## 11/16/04 CLAIMS AS AMENDED - PART II

AMENDMENT A		(Column 1)		(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		19	Minus	..	<i>paid</i>
Independent		6	Minus	...	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

SMALL ENTITY		OTHER THAN OR SMALL ENTITY	
RATE	FEES	RATE	FEES
BASIC FEE	445	OR BASIC FEE	890
X\$ 9=		OR X\$18=	18
X42=		OR X84=	
+140=		OR +280=	
TOTAL		OR TOTAL	728

SMALL ENTITY		OTHER THAN OR SMALL ENTITY	
RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X40=		OR X80=	
+135=		OR +270=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B		(Column 1)		(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	..	=	
Independent		Minus	...	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

AMENDMENT C		(Column 1)		(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	..	=	
Independent		Minus	...	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

AMENDMENT C		(Column 1)		(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	..	=	
Independent		Minus	...	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

AMENDMENT C		(Column 1)		(Column 2)	(Column 3)
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	..	=	
Independent		Minus	...	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					<input type="checkbox"/>

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.